

# HIGHLIGHTS OF 1947



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Thirty-Third Annual Report

of the

National Society for the Prevention of Blindness

1947

National Society for the Prevention of Blindness, Inc. 1790 Broadway, New York 19, N. Y.

### Highlights of 1947

FORTY years ago the idea of prevention of blindness was just a spark, igniting the imagination of a few public spirited men and women. Today it is a torch, casting its rays throughout the land, and far beyond our shores. A State report made in 1907 by Dr. F. Park Lewis of Buffalo, New York, which stressed "the fact that most blindness is unnecessary and preventable" came to the attention of Miss Louisa Lee Schuyler, a brilliant initiator of social welfare movements. She called together a few outstanding civic and scientific leaders to consider what could be done and, as a result of their efforts, the New York State Committee for the Prevention of Blindness was organized the following year. In 1915, the organization extended its scope by becoming The National Committee for the Prevention of Blindness, and in 1928 the present name was adopted by changing the word "Committee" to "Society."

In the beginning, efforts were concentrated on spreading the knowledge that the use of prophylactic drops in the eyes at birth is a virtually certain preventive of blindness from ophthalmia neonatorum, "babies' sore eyes." At that time this disease was responsible for 28 per cent of blindness among pupils in schools for the blind in the United States. The Society's campaign of public education and the consequent legislation throughout the nation, making use of a prophylactic mandatory, have brought about a reduction of 90 per cent in the number of babies losing their sight from this disease. As the years passed, the Society's activities were enlarged to include such projects as its campaign to reduce industrial eye hazards, promotion of sight-saving classes for partially seeing children, encouragement of preschool vision testing, development of medical social service in eye clinics and eye hospitals, and sponsorship of a demonstration glaucoma clinic.

The success of the National Society for the Prevention of Blindness in this country led to the forming of an International Association for Prevention of Blindness, in 1929, with a secretariat in Paris, France. World War II halted the progress of international activities, but the Society is again being called upon to assist the International Association and to help in bringing the protection of eyesight within the scope of the World Health Organization of the United Nations.

During recent years, the Society has also taken an active part in the development of sight conservation programs in the other American republics. The provision of a Spanish version of our film, "Eyes for Tomorrow," through the cooperation of the Office of the Coordinator of Inter-American Affairs, is an example of the Society's participation. More recently, a gold medal, a reproduction of which appears on the cover of this report, was presented by the Society to Dr. Harry S. Gradle, long active in the organized movement for prevention of blindness in this country, for his contribution as one of the principal founders of the Pan-American Association of Ophthalmology.

Since "life begins at forty," the Society looks forward expectantly to ever increasing results as it develops the long-range pro-

gram designed by its Committee on Plan and Scope.

To our loyal members and donors whose support makes our work possible, and to all who are helping to make this a better seeing world, we express our thanks and our confident hope that "the best is yet to come."

Mæson Hodigolow President

# Highlights of 1947

DR. C.-E. A. WINSLOW, noted public health authority, sounded the keynote of the future of the National Society for the Prevention of Blindness in his discussion on "Prevention of Blindness in a Public Health Program," at the Society's 1947 annual meeting. He pointed out the need for research as well as the need for providing service in a public health program, and indicated that a number of challenging questions on sight conservation still remain to be answered. It is hoped that a way toward the solution of some of these problems will be revealed in the current and future activities of the Society, presented briefly in this annual report.

### Vision Testing of School Children . . .

A study, now in progress, to evaluate practical methods of vision testing suitable for use by school teachers or school nurses was initiated by the Society and collaborating agencies in 1947. This was undertaken upon the invitation of the Division of Research in Child Development of the U. S. Children's Bureau, Federal Security Agency, which is participating in the study.

The cooperation of the Missouri State Division of Public Health and the St. Louis City Board of Education was enlisted in obtaining St. Louis as the city where the study is to be made. Approximately 1,200 children will receive not only the routine vision tests given by teachers, nurses or technicians, but also an examination by an eye physician at the Washington University Eye Clinic. In this way it will be possible to learn which vision testing methods are the most efficient and how accurate each test is in comparison with the eye physician's complete examination.

An advisory committee of nationally recognized eye physicians, representing the American Academy of Ophthalmology and Otolaryngology, the Section on Ophthalmology of the American Medical Association, and the American Ophthalmological Society, was named. The members of this committee are: William L. Benedict, M.D., Rochester, Minnesota, chairman; S. Judd Beach, M.D., Portland, Maine; Alfred Cowan, M.D., Philadelphia, Pennsylvania; Richard C. Gamble, M.D., Chicago, Illinois; Thomas H. Johnson, M.D., New York, N. Y.; and Lawrence T. Post, M.D., St. Louis, Missouri. The Federal Office of Education, the National Education Association, the American Public Health Association, and other related groups, are also

represented on an advisory committee; and several members of the National Society's staff are serving as consultants to those giving the tests, keeping the records, and analyzing the data. It is expected that the findings and recommendations growing out of the study will lead to a more uniform and practical procedure in testing the eyesight of school children.

### German Measles and Congenital Cataracts . . .

The relationship between certain maternal infections and congenital cataracts and other malformations is the subject of a joint research project of the Society and the American Academy of Pediatrics. Obstetricians, ophthalmologists, and pediatricians were sent questionnaires seeking data on cases of German measles in expectant mothers and on children with congenital defects that might be attributed to other infections in the expectant mother, such as chicken pox, mumps, and influenza.

The information as it is obtained is being studied by the following committee: Herbert C. Miller, M.D., professor of pediatrics, University of Kansas Hospitals, Kansas City, Kansas, chairman; Stewart Clifford, M.D., and Clement A. Smith, M.D., Boston, Massachusetts; Josef Warkany, M.D., Cincinnati, Ohio; James Wilson, M.D., Ann Arbor, Michigan; and Herman Yannet, M.D.,

Southbury, Connecticut.

An analysis of the reports received in the first three months of this study, of 132 expectant mothers who contracted German measles during the first trimester of pregnancy, disclosed that 76 babies had congenital cataracts; 3 had congenital glaucoma, an eye disease usually resulting in permanent blindness; 5 had abnormally small eyes; 2 had severe squints; 2 had inflammations of deep membranes of the eye; and 2 had nystagmus, a defect which results in constant involuntary movement of the eyes. Other congenital defects noted were deafness, heart malformations, and abnormalities of the brain. Of the 132 cases studied, only 18 infants were free from any defect.

# Studies on Causes of Blindness and Eye Accidents in Children • • •

The latest study of the causes of blindness among children in schools for the blind was completed during the past year and revealed a further reduction in blindness due to ophthalmia neonatorum. Less than 3 per cent of children newly admitted to

schools for the blind have lost their sight because of this disease, as contrasted with 28 per cent when the Society first began its campaign to eradicate ophthalmia neonatorum. Though the reduction is notable, the conquest of babies' sore eyes is still not fulfilled. Another statistical study of the Society, begun in 1947, is concerned with the causes of 1,800 eye accidents among school children; the original records for this study were supplied by the Board of Education of Louisville, Kentucky.

### Vision in Work Production . . .

Two years ago the Society recommended that the Public Buildings Administration of the Federal Works Agency together with the U. S. Public Health Service conduct a study of the influence of lighting, eyesight and environment upon work production. The Society contributed toward the expenses, and provided service and advice in this project. The report of the study, published by the Federal Government in 1947, indicated that despite personnel turn-over and increased complexity of the government forms used in the department in which the demonstration was made, there was an increase in production efficiency of more than 5 per cent following improvements in lighting and painting of rooms, and visual correction of the employees. It is expected that the benefits disclosed by this study will be persuasive not only to government but to industry to provide improved lighting and seeing conditions in the interest of efficiency, economy, and comfort.

### Prevention of Blindness from Glaucoma . . .

The demonstration Glaucoma Clinic, located at the Manhattan Eye, Ear and Throat Hospital in New York City, which the Society organized in 1942 has been completely taken over by the hospital. This is the first demonstration that has been made a permanent part of a hospital setup. Visitors to the clinic who were interested in establishing clinics in their respective localities included ophthalmologists from Brazil, Egypt, and Portugal, as well as from every section of the United States.

The first glaucoma clinic in The Bronx has just been started at Montefiore Hospital under the direction of Samuel Gartner, M.D., a member of the Society's Committee on Glaucoma. Special attention will be given to methods of early diagnosis and research, the details of which will be determined as the clinic develops. The Society has been called upon for advice and guidance on services to be offered in this clinic.

Organizations in Michigan, Missouri, New York, Pennsylvania, and the State of Washington have requested information and consultation service concerning the development of glaucoma clinics and about the functions of a medical social worker in such clinics.

In New Orleans, the Eye Clinic of Charity Hospital has asked for home supervision of glaucoma cases by the Public Health Nursing Bureau of the City Health Department. As a result, the Health Department has requested much material from the National Society to help in preparing its eighty public health nurses to do the follow-up on these cases.

The Youngstown Society for the Blind and Disabled has called upon the National Society for suggestions and publications in planning a program to educate the local public on glaucoma. The radio, bus placards, pamphlets, and public speaking were utilized in the conduct of the program, on which the Youngstown Society reports good progress.

### Industrial Sight Conservation • • •

As reported in previous years, two seminars on industrial ophthalmology aroused the interest of ophthalmological departments in a number of medical schools. One direct result of this pioneering was the inclusion, in the Spring of 1947, of a course on Occupational Aspects of Ophthalmology for postgraduate ophthalmological students at New York University College of Medicine. The Society was asked to organize and direct this course, in which 22 lecturers, including Society staff members, participated. The Society was commended not only by the Committee on Graduate Education and the Department of Ophthalmology, but by the 25 physicians who took the course; and an invitation was extended to have the course repeated in 1948.

The Society is also helping to develop the work which its industrial department instituted in New Jersey on the "Industrial Sight Conservation Program." According to the Industrial Hygiene Newsletter of the U. S. Public Health Service, this is the first state-wide sight conservation program ever launched in the United States. The program was planned in conference with all official as well as professional and other interested organizations. The project in New Jersey is starting with a practical demonstration of a complete modern eye program in five plants, and it ultimately will reach all industries in the state. It is confidently

expected that the methods, procedures, and results will be helpful in the inauguration of similar programs in other states.

# Oak Ridge Eyesight Conservation Institute • •

The Society took part in a three-day institute at Oak Ridge, Tennessee, which undoubtedly will have far-reaching effects. Several hundred persons, representing ten different state departments of health, education, and welfare, came for intensive work in eyesight conservation. The institute was under the direction of a local committee which worked closely with Society staff members in planning the program. Sponsors included the local Lions Club, the Departments of Education, Health, and Welfare, and the City Management Division.

Attending delegates represented the following states, in addition to Tennessee: Alabama, Arkansas, Florida, Georgia, Illinois, Indiana, Kentucky, Massachusetts, Missouri, New Jersey, New York, North Carolina, Oregon, Pennsylvania, South Carolina, and Texas, as well as the District of Columbia.

As a result of the institute, steps were taken to initiate college courses for the training of professional and technical personnel for eye service and for improvement of visual conditions surrounding the job. It is believed that the enthusiasm and stimulation generated by this institute will result in similar institutes in other localities. In fact, the interest was so keen that a committee was appointed which organized the East Tennessec Society for Sight Conservation.

### Intensive Eye Institute in New York . .

During the past year the Society conducted a two-weeks' institute in New York City for 37 members of health, education, and welfare agencies; these registrants came from Florida, Maryland, Michigan, New Jersey, New York, Pennsylvania, the District of Columbia, and Capetown, South Africa. In addition to the Society's staff, there were 16 other lecturers, of whom eight were local ophthalmologists. Topics relating to various aspects of sight conservation were discussed and visits were arranged to the Glaucoma Clinic of the Manhattan Eye, Ear and Throat Hospital, and to the Eye-Bank for Sight Restoration. Provisions were also made for practice periods in vision testing and for demonstration of vision testing devices. The purpose of the institute was to give orientation in eye health to various agency workers, particularly to those new in the field.

#### In Brief . . .

Social Work Scholarships for Sight Conservation.—Following the Society's announcement of a number of one-year scholarships of \$1,000 each for students interested in professional education, to qualify for positions in the field of sight conservation and prevention of blindness, five students from widely scattered geographic areas were selected during the past year.

Summer Courses.—Elementary courses for the preparation of supervisors and teachers of partially seeing children were given during the summer session of 1947 at Florida State University, Tallahassee, Florida; Illinois State Normal University, Normal, Illinois; Teachers College, Columbia University, New York, N. Y.; and Wayne University, Detroit, Michigan. An advanced course was also given at Wayne University.

Other Educational Activities.—In carrying on its educational program during the past year, the Society distributed hundreds of thousands of publications as well as vision testing charts and posters. Its official quarterly journal, the Sight-Saving Review had a circulation of 1,500, reaching leaders in public health, medicine, education, industry, and social welfare. The Eye Health and Safety News, published twice in 1947, was distributed free of charge to 2,000 representatives of the same fields, particularly among local prevention of blindness workers.

Other educational activities may be indicated by the following office records: 69 field trips; 208 meetings attended; 87 talks given; 8 radio talks, including interviews and panels; 8 articles prepared for publication; exhibit units and consultation service for 21 conventions; exhibit materials and mounted displays for 129 other meetings; 132 sales of films; 102 loans and rentals of films.

Leslie Dana Award.—The Society was pleased to announce that the Leslie Dana Gold Medal, awarded annually for outstanding achievements in the prevention of blindness and the conservation of vision, was presented this year to Frederick H. Verhoeff, M.D., of Boston, Massachusetts.

Edward C. Ellett, 1869–1947.—The Society suffered the loss of one of its distinguished vice-presidents and board members in the death of Edward C. Ellett, M.D., of Memphis, Tennessee.

## Summary of Finances

Office Maintenance \$30,161.42 Salaries 128,283.85 Field Service 6,987.37 Publications and Exhibits 34,423.60 Distribution Costs 19,824.95 Meetings and Courses 1,587.94 Cooperative Projects 5,720.55 Annuities and Insurance 12,350.79 Committee on Plan and Scope 1,472.23 Illuminating Demonstration 3,788.00	\$244,600.70
INCOME DURING 1947—Operating Account	
Donations New \$23,251.63 Renewal 126,507.62 Memberships New 820.30 Renewal 18,198.25 \$168,777.80	
Honoraria, Royalties, Sight-Saving	
Review, Other Publications, Films, Posters and Vision Testing Charts Income, Endowment and Reserve	
Funds	
ministered by the Society)	
Wendel Foundation \$625.00 Others 29,211.37 29,836.37	\$239,031.85
	\$5,568.85
Excess of Expenditures	\$5,500.65
Total Resources at December 31, 1946	\$746,328.77
Legacies received in 1947 and placed in Reserve and Endowment Funds	
Net Increase due to Redemption or Sale of Securities	
\$68,059.95	
Less: Excess of Expenditures—	
Operating Fund 5,568.85	62,491.10
Total Resources at December 31, 1947	\$808,819.87*

<sup>\*</sup> This includes mortgages and securities at book value. It does not include the following: Trust Funds not administered by the Society, 1/40th share in the unliquidated properties of the Wendel Foundation, and the Society's share in estates in the course of administration.

The foregoing statement is based on the report of Barrow, Wade, Guthrie and Company, by whom the accounts of the Society were audited. A copy of the report will be sent to anyone requesting it.

The Executive Director is required by the Board of Directors to submit a detailed statement of proposed expenditures and to account for all sums spent in accordance with budget appropriations. Vouchers are on file for every expenditure.

The Society's main service, including preparation and distribution of material, such as vision testing charts, films, and publications, is rendered through the work of an executive staff. This staff is composed of professional personnel qualified to deal with a wide range of scientific and technical facts and procedures, and competent to work with other agencies and individuals through whom the movement for sight conservation may be furthered. Secretarial and clerical assistants comprise the remainder of the office force. During 1947, the number on the monthly payroll averaged 43 persons. Officers and directors receive no salaries, with the exception of the Secretary, who is employed as a permanent member of the Society's staff.

The total of \$168,777.80 received in annual contributions represents 32,209 gifts from approximately 30,500 persons, and indicates a growing interest on the part of the public.

### Form of Bequest

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1790 Broadway, New York 19, N. Y.

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